Substitute for Form PTO-675 Effective December 8, 2004						Appl	Application or Docker Number		
AF	PLICATION AS FILED	- PART				1/	No K	AXI	
FOR	(Column 1)	(Column 2)	s	MALL EI	YTITY	OR		OTHER THAN	
BASIC FEE [37 CFR 1 16(4), (6), 00 (c)]	NUMBER FILED	NUMBER EXTRA		EO		7	<u> </u>	MALL ENTITY	
SEARCH FEE (37 CFR 1 18(4), (4), ox (m))	N/A	NA			FEE (1)	1	RATE	1,66	
EXAMINATIONECE		NIA	. 14		\$250	1 1	HIA	300,0	
TOTAL CLAIMS	NA	'N/A	ivi		\$100	1 1	NIA	\$500	
(07 OFR 1 16(1)) INDEPENDENT CLAIMS	minus 20 «		X\$ 25			1 1	N/A	\$200	
(37 CFR 1 16(h))	I minus 3 a					OR	X\$50	•	
APPLICATION SIZE	If the specification and casheets of paper, the applies \$250 (\$125 for small of	frawings exceed 100					X200	•	
(37 CFR 1 16(4))	additional 50 shoots	aluty) for each	11	-	- 1	. 1.			
MULTIPLE DEDENDE				1	. 1	- 1			
Han all	CLAIM PRESENT (37 OFR' 1.16	())	+180=	1	-	 -	.200		
If the difference in column 1 is less than zero, enter "O" in column 2.			TOTAL	+-		Ļ	+360=		
APPLICAT	ION AS AMENDED - P.	ART II	JAIOI	<u></u>	<u></u>		TOTAL		
$\sim 1/\sim \sim 1/\sim 1$	uma 1) (Colu		,	٠			•		
₹ REM	AIMS HIGH	EST	SMALI	LENTITA		OR	OTHE	R THAN ENTITY	
Total Orcenting independent orcentians Application Size Fee C37	TER PREVIO	USLY EXTRA	RATE (S)	ADO		√ R	ATE (\$)		
Of CFR 1.16(1)	Minus		1	FEE				ADOI- TIONAL	
OICER LIANII	Minus · L		X\$ 25	-	2]。	R XS	50 _	FEE (1)	
			X100 _	1	. Of	X20	ю _		
THE SENTATION OF	MAZTIFLE DEPENDENT CLAM	(37 CFR 1.16@)	+180=		\mathcal{H}	-			
م الوالا لا إلى	2100	LETRO	TOTAL	-	→ OR		30±		
CLAH	n 1) (Column	2) (Cotumn 3)	ADO'L FEE		OR	ATOT J'OCIA	FEE		
REMAIN AFTE	HIGHEST NUMBER	PRESENT			7				
AMENDA	PREVIOUS PAID FOR	LY EXTRA	RATE (S)	ADDI- TIONAL	1	RATI	€ (2)	ADOI-	
D7 CFR 1.10(III	Minus	7	X\$ 25 .	FEE (5)	┥.	<u> </u>		TIONAL FEE (S)	
price Liany. Application Size Fee (37 CF	Minus •	1.	X100.		OR	X\$50	•		
TRST PRESENTATION OF THE	н 1.16(s))				OR ·	X200	·•		
	LTIPLE DEPENDENT CLAIM BY	CFR 1.16@)	+180=		1 1	+360:			
					OR.	₹30 0;	2 .	. 1	
the enter to the			TOTAL .			TOTAL			
the entry in column 1 is less the "Highest Number Previo	s than the entry in column 2, we ously Paid For th THIS SPACE usty Paid For (N THIS SPACE sty Paid For (Total or Independent of the by 37 CFR 1.16. The Information or Independentiality is povement by 35	ile or in column 3.	VODI FEE			TOTAL ADD'L FE	E		

collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the string pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments we amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS RESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450. If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2